

TOWN OF HERNDON
DEPARTMENT OF FINANCE
REVENUE DIVISION
PO BOX 427
HERNDON, VIRGINIA 20172-0427
(703) 787-7358
FAX (703) 435-8121

APPLICATION FOR TOWN BUSINESS/OCCUPATIONAL LICENSE

BUSINESS CATEGORY (PLEASE CHECK ONE)

- ☐ BUSINESS/PERSONAL SERVICE
☐ BUILDER DEVELOPER
☐ CONTRACTOR
☐ HOTELS AND MOTELS
☐ PROFESSIONAL, SPECIALIZED OCCUPATION
☐ REPAIR SERVICE
☐ RETAIL/RESTAURANT
☐ TELEPHONE COMPANIES
☐ LEASING/RENTING (NO INVENTORY)
☐ OTHER

(PLEASE EXPLAIN THE NATURE OF YOUR BUSINESS)

- ☐ INDIVIDUAL
☐ PARTNERSHIP
☐ CORPORATION

FEDERAL TAX ID# _____

SOCIAL SECURITY # _____

NUMBER OF EMPLOYEES _____

SQUARE FEET OCCUPIED _____

TRADE NAME AND ADDRESS

NAME _____

ADDRESS _____

CITY _____

STATE _____ ZIP _____

TELEPHONE () _____ FAX() _____

E-MAIL ADDRESS _____

ALL CORRESPONDENCES SHALL BE MAILED TO TRADE ADDRESS UNLESS OTHERWISE SPECIFIED.

**APPLICANT NAME AND MAILING ADDRESS
(IF DIFFERENT FROM TRADE ADDRESS)**

NAME _____

ADDRESS _____

CITY _____

STATE _____ ZIP _____

DATE BUSINESS ESTABLISHED IN HERNDON _____ EMERGENCY PHONE NUMBER _____

SECTION I FOR LICENSE MEASURED BY GROSS RECEIPTS

ESTIMATE GROSS RECEIPTS FROM THE TIME OF BEGINNING THROUGH END OF CURRENT YEAR

GROSS RECEIPTS _____

TAX RATE _____

TAX _____

PENALTY/INTEREST _____

TOTAL _____

SECTION II- FOR OPERATORS OF COIN- OPERATED MACHINES

TYPE OF MACHINES _____

NUMBER OF MACHINES _____

TAX RATE _____

TAX _____

PENALTY/INTEREST _____

TOTAL _____

SECTION III- FOR LICENSE BASED ON FLAT TAX

TYPE OF LICENSE BASED ON FLAT RATE

TAX _____

PENALTY/INTEREST _____

TOTAL _____

ALCOHOLIC BEVERAGE

A.B.C. BOARD NO. _____

APPLICANT SIGNATURE _____

PRINT TITLE _____

FOR OFFICE USE ONLY

TOTAL TAX & PENALTIES _____

REVENUE CLERK INITIALS _____ **DATE** _____

COMMUNITY DEVELOPMENT / ZONING APPROVAL

PLANNERS INITIALS _____ **DATE** _____

APPROVED (PLEASE CHECK ONE)

☐ YES

☐ NO

LICENSE NUMBER